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Relationship of Post-natal Depression with Life and Marital Satisfaction and Its Comparison in Joint and Nuclear Family System

Seema Munaf^{a*}, Barerah Siddiqui^b

^{ab} Institute of Clinical Psychology, University of Karachi, 118, Block 20 Abulasar Hafeez Jalindhri Road, Gulistan-e-Jauhar
Karachi-7529, PAKISTAN

Abstract

The objective of this study was to investigate the relationship of Post-natal depression with life and marital satisfaction. It further investigated the significance of family systems in Post-natal depression. Fifty housewives who were resident of Karachi, Pakistan, and who have given birth during last four weeks through normal delivery, voluntarily participated in the study. Results indicated significant negative relationship of scores of Post-natal depression with life and marital satisfaction. Further women from joint families were significantly less depressed than women from nuclear families. Hence it seems that life satisfaction, marital satisfaction and family setup play significant role in Post-natal depression.

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Key words: Post-Natal Depression, life satisfaction, marital satisfaction, joint family system, nuclear family system

1. Introduction

The relationship between childbirth and the mother's psychological problem is often connected. Many earlier studies do indicate that in the postnatal period, mother and child are more vulnerable to mental and psychological dilemmas. Particularly we find in women baby blues and post natal depression which hampers her handling of infant properly and as per cultural and social demands. Our Problem of the research therefore focuses around the questions that whether life and marital satisfaction are related negatively to post-natal depression or not, and whether post-natal depression is more intensive in mothers of nuclear than joint family systems in Pakistani culture or it is of similar intensity.

The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR, American Psychiatric Association, 2000) categorize this postnatal depression under post partum onset specifier and specify it as postpartum major depressive episodes if its onset occurs within the first four weeks of child birth. The National

Corresponding author name: * Seema Munaf, Tel. +92300227858

E-mail: drseemamunaf@hotmail.com

Women's Health Information Center (2005) explains that during pregnancy, two female hormones, estrogens and progesterone, raises to a great extent, however after childbirth within 24 hours the quantity of these hormones quickly fall to their previous stage. Investigators believe that these rapid changes in hormones may lead to depression. Priest (1983) considers postnatal depression as a common reaction, from which women may quickly recover. It appears from various researches that if empathy and support is provided to women during the postnatal period than their depression can become less and manageable.

In spite of innumerable researches the only one contributing factor in the development of postpartum depression (PPD) is not yet clear. It is believed that various/few factors together may add to hormonal changes in the postnatal period of women resulting in depression. As cited in Mason, Rice, and Records (2005) "Experiential factors, such as a lack of social support, marital discord, a history of depression, and socioeconomic hardship, are reported as contributing to PPD (Beck, 1996, 1998; Unterman et al., 1990; Wood, Thomas, Dippleman, & Meagan, 1997)".

Life satisfaction is one of the significant factors influencing psychological well being in the postnatal period and is usually connected with family and social support, financial position, marital satisfaction, family setup etc. The work of Aquino, Russell, Cutrona, and Altmaier (1996), shows that life satisfaction is significantly related to social support. Hence we can expect that if a woman finds social support during post natal period then she can experience satisfaction with her life and may not feel depression with high intensity resulting from hormonal changes. Apart from life satisfaction another important variable is of marital satisfaction or marital quality and adjustment which also play significant role in post natal depression. Women's desires and hopes from the marital relationship help her to remain satisfied with her life. Husband's helpful attitude, love and attention during pregnancy and after delivery; verbal and nonverbal supporting communication reduces her dilemmas. Hara et al, (1984), believe that uncomfortable relationship with husband and parents makes women susceptible for post-partum depression.

In Pakistan if it is joint family then in post and prenatal period women gets support from majority of family members, where as in nuclear family there are few people to support each other. Mumford, Saeed, Ahmad, Latif and Mubbashar (1997) found remarkable relationship between depression and females residing in nuclear families. Similar findings can be seen in the work of Husain, Creed, and Tomenson (2000). Reference to depression in women after delivery Ahmad and Munaf (2006) concluded from their study that in their postnatal period women in nuclear family are more vulnerable to baby blues than those residing in joint families. Rahman, Iqbal, Harrington (2003) study on women living in southern Kahuta, Pakistan, found that 25% and 28 % women experienced depression in their antenatal and post-natal period respectively.

Hence it appears from the literature that together with hormonal changes other social factors do play important role in making women depress during their postnatal period. Thus the purpose of our present research was to study the relationship of post-natal depression of women with their life and marital satisfaction. This study further investigated the difference in post natal depression of women residing in two different family systems in city of Karachi, Pakistan.

1.1. Hypotheses

1. Scores of Post-natal depression would be negatively correlated with the scores of life satisfaction and marital satisfaction, and 2. Women residing in nuclear family structure would be more prone to post-natal depression than women residing in joint family system.

1.2. Research Design

The present research is a correlation as well as the comparative study. It aimed to investigate the relationship of scores of post-natal depression with life satisfaction and marital satisfaction. Moreover it focuses upon the importance of nuclear and joint family in the life of women after delivery and comparison is made of post natal depression between women belonging to two family systems.

2. Research Methodology

2.1. Participants:

Through purposive sampling 50 married women including 25 from joint families (It comprised of husband, wife, their children, husband's parents and siblings and families of husband's married brothers) and 25 from nuclear families (It consist of husband, wife and their dependent children), who have given birth during last four weeks through normal delivery were selected. Their age range was between 25-40 years, they were housewives and belonged to middle economic class. Their minimum education was intermediate and all of them were resident of city of Karachi, Pakistan.

2.2. Measures

2.2.1. Edinburgh Post-natal Depression Scale (EPDS, Cox, Holden & Sagovsky, 1987):

It consists of 10 items, which intend to assess depression of women during the past seven days on 4-point rating scale ranging from 0 to 3. Its maximum total score is 30.

2.2.2. Satisfaction with Life Scale (SWLS, Diener, Emmons, Larsen & Griffin, 1985):

The SWLS consists of 5-items that are supposed to be rated on 7 point rating scale. It evaluates individual's satisfaction with life in general.

2.2.3. Marital Satisfaction Checklist (MSC)

It is a self developed checklist based on interview with married women. It consists of 11 items related to marital relation, adjustment, communication and interaction. Women are requested to rate each statement as right or wrong.

2.3. Procedure

After taking consent of hospital authorities, women were approached in their post natal period (within 4 weeks after delivery). With their consent to participate in the study, researchers approached them in the hospital or at their residence. They were requested to fill the demographic information form, followed by administration of Edinburgh Post-Natal Depression Scale, Satisfaction with Life Scale and Marital Satisfaction Checklist. After scoring Pearson product moment correlation coefficient and t'test were applied in order to interpret the results.

3. Results and Findings

Table 1. Correlation of post-natal depression with life satisfaction and marital satisfaction

Variables	Statistics	Post-natal Depression	Life Satisfaction
Life Satisfaction	Pearson	- .576(**)	
	Correlation		
	Sig. (1-tailed)		
	N		
Marital Satisfaction	Pearson	- .745(**)	.458(**)
	Correlation		
	Sig. (1-tailed)		
	N		

** Correlation is significant at the 0.01 level (1-tailed).

3.1. Main Results

There exists a significant negative correlation of scores of post-natal depression with life and marital satisfaction.

3.2. Supplementary Results

There exists a significant positive correlation between scores of marital satisfaction and life satisfaction.

Table 2. Mean difference of Post-natal depression, life satisfaction and marital satisfaction of women residing in nuclear and Joint family setup

Variables	Family System	N	Mean	SD	t	df	Sig. level
Post –natal Deopression	Joint	25	9.16	5.24	-4.19	48	.000
	Nuclear	25	15.76	5.86			
Life Satisfaction	Joint	25	23.80	5.65	3.53	48	.001
	Nuclear	25	18.04	5.87			
Marital Satisfaction	Joint	25	8.88	1.90	2.10	48	.040
	Nuclear	25	7.72	1.99			

3.3. Main Results

Results indicate women of nuclear families seem to be more depress than women of joint families after their delivery during 4 weeks.

3.4. Supplementary Results

Life satisfaction and marital satisfaction of women of joint families seems to be more than that of women's of nuclear families after their delivery during 4 weeks.

4. Discussion

The analysis of results indicates significant findings. Our first formulated hypothesis was proved as the scores of post-natal depression were negatively correlated with the scores of life and marital satisfaction (See table 1), therefore we can interpret that it appears that if there is general life satisfaction due to positive conditions in life and if there is support, love, affection and guidance of husband in the time of stress then women are able to manage stresses of life with supporting hands. On the other hand if they experience marital conflict and their family members are not supporting in child rearing and if their satisfaction with life is low then there are chances that they become vulnerable to depression. Similar findings were reported by Kumar and Robson, (1984) who viewed poor relationship with spouse and parents as risk factors for post-partum depression. A supplementary finding of our present work shows that there is a positive correlation between life satisfaction and marital satisfaction, which may be one of the reasons why both life and marital satisfaction are negatively related to depression.

It is also obvious from table 2 that our second hypothesis is as well proved. It is clear that women from nuclear family setup become more depressed than women from joint family setup in their post natal period. Ali, Anwar, Mohammad, Lobo, Midhet, Ali, and Saud (1993) too came to conclusion that female's depression was significantly related to nuclear family system. Hence we can say that as in joint family there is more support available and responsibilities are shared therefore women are less susceptible to depression. Moreover additional findings also indicate that life and marital satisfaction of joint family women is higher than nuclear family women. This may be because of guidance and support provided in joint families which is missing in nuclear families. Roy, Steptoe, and Kirschbaum (1998) as well are of view that social support helps to protect against sickness and facilitate one to get well.

5. Conclusion

From the above findings we can conclude that nuclear family setup, low life and marital satisfaction are important risk factor for enhancement of post natal depression. Therefore if love and affection is provided by marital partner and if proper direction and support is given by family or friends, then there are chances that women can easily manage depression arising due to hormonal changes in post natal period. If possible those residing in nuclear families may take counselling services from professional institutes of psychological services during their postnatal depression.

5.1. Implications

Results of the research are of great significance as it is recommended to mothers to take support and direction from marital partner, their family members, neighbours and friends during and after the delivery. This would help women of nuclear families to handle their responsibilities in a relax way.

5.2. Limitations, avenue for future research and recommendation

As the sample size was small and it did not included mothers of all three economic classes, as well as employed women and less educated women didn't participated in the study therefore it is recommended that future researcher may try to overcome these limitations and consider these variables in their research. Further by taking into account other demographic variables and making the research cross sectional we can arise at number of other psychosocial variables, which may possibly play vital role in the advancement of depression in post natal stage.

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